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| Please type a plus sign (+) inside this box U.S. Patent Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection | PTO/SB/05 (11-00) Approved for use through 10/31/2002. OMB 0651-003 and Trademark Office; U.S. DEPARTMENT OF COMMERCE of information unless it displays a valid OMB control number | | |
| UTILITY Attorney D | Docket No. | | |
| PATENT APPLICATION First Inver | ntor Marc H. Schneider | | |
| TRANSMITTAL Title Furt | Turyl Alcohol and Lignin Adhesive Composition | | |
| (Only for new nonprovisional applications under 37 CFR 1.53(b)) Express M | ail Label No. | | |
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. ADDRE | Assistant Commissioner for Patents Box Patent Application Washington, DC 20231 | | |
| 1. X Fee Transmittal Form (e.g., PTO/SB/17) 7. | CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) tide and/or Amino Acid Sequence Submission licable, all necessary) Computer Readable Form (CRF) cification Sequence Listing on: i. | | |
| Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. | | | |
| Customer Number or Bar Code Label (Inser Customer Number of Bar Code Label) | or X Correspondence address below | | |

Jones, Tullar & Cooper, P.C P.O. Box 2266, Eads Station **Address** City State Zip Code Arlington 22202 Country Fax Telephone 703-415-7546 Registration No. (Attorney/Agent) 31732 Name (Print/Type) <u>Leander F. Aulisio</u>

Leander F. Aulisio

February 27, 2002 Burden Hour Statement: This formula estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Date

PTO/SB/17 (11-01)

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

X Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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(\$) 547.00

| Complete if Known | | |
|----------------------|-------------------|--|
| Application Number | | |
| Filing Date | February 27, 2002 | |
| First Named Inventor | Marc H. Schneider | |
| Examiner Name | | |
| Group Art Unit | | |
| Attorney Docket No. | | |

| METHOD OF PAYMENT (check all that apply) | FEE CALCULATION (continued) | | | |
|--|-----------------------------|----------------------|--|----------|
| X Check Credit card Money Order None | 3. ADDITIONAL FEES | | | |
| Deposit Account: | Large Entity | Small Entit | <u>Y_</u> | |
| Deposit Account | Fee Fee Code (\$) | Fee Fee Code (\$) | Fee Description | Fee Paid |
| Number Deposit | 105 130 | 205 65 | Surcharge - late filing fee or oath | |
| Account Name | 127 50 | 227 25 | Surcharge - late provisional filing fee or cover sheet | |
| The Commissioner is authorized to: (check all that apply) | 139 130 | 139 130 | Non-English specification | |
| Charge fee(s) indicated below Credit any overpayments | 147 2,520 | 147 2,520 | | |
| Charge any additional fee(s) during the pendency of this application | 112 920* | 112 920* | For filing a request for ex parte reexamination | |
| Charge fee(s) indicated below, except for the filing fee | 112 920 | 112 920 | Requesting publication of SIR prior to Examiner action | |
| to the above-identified deposit account. FEE CALCULATION | 113 1,840* | 113 1,840* | Requesting publication of SIR after Examiner action | |
| 1. BASIC FILING FEE | 115 110 | 215 55 | Extension for reply within first month | |
| Large Entity Small Entity | 116 400 | 216 200 | Extension for reply within second month | |
| Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid | 117 920 | 217 460 | Extension for reply within third month | |
| 101 740 201 370 Hilliby Gling for | 118 1,440 | 218 720 | Extension for reply within fourth month | |
| 106 330 206 165 Design filing fee 370.00 | 128 1,960 | 228 980 | Extension for reply within fifth month | |
| 107 510 207 255 Plant filling fee | 119 320 | 219 160 | Notice of Appeal | |
| 108 740 208 370 Reissue filing fee | 120 320 | 220 160 | Filing a brief in support of an appeal | |
| 114 160 214 80 Provisional filing fee | 121 280 | 221 140 | Request for oral hearing | |
| | 138 1,510 | 138 1,510 | Petition to institute a public use proceeding | |
| SUBTOTAL (1) (\$) 370.00 | 140 110 | 240 55 | Petition to revive - unavoidable | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | 141 1,280 | 241 640 | Petition to revive - unintentional | |
| Fee from Extra Claims below Fee Paid | 142 1,280 | 242 640 | Utility issue fee (or reissue) | |
| Total Claims 35 -20** = 15 x 9 = 135 | 143 460 | 243 230 | Design issue fee | |
| Independent $4 - 3^{**} = 1 \times 42 = 42$ | 144 620 | 244 310 | Plant issue fee | |
| Multiple Dependent = | 122 130 | 122 130 | Petitions to the Commissioner | |
| | 123 50 | 123 50 | Processing fee under 37 CFR 1.17(q) | |
| Large Entity Small Entity Fee Fee Fee Fee Fee Description | 126 180 | 126 180 | Submission of Information Disclosure Stmt | |
| Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20 | 581 40 | 581 40 | Recording each patent assignment per property (times number of properties) | |
| 102 84 202 42 Independent claims in excess of 3 | 146 740 | 246 370 | · · · · · · · · · · · · · · · · · · · | |
| 104 280 204 140 Multiple dependent claim, if not paid | | | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 109 84 209 42 ** Reissue independent claims over original patent | 149 740 | 249 370 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 110 18 210 9 ** Reissue daims in excess of 20 | 179 740 | 279 370 | Request for Continued Examination (RCE) | |
| and over original patent | 169 900 | 169 900 | Request for expedited examination | |
| SUBTOTAL (2) (\$) 177.00 | Other fee (specify) | | | |
| **or number previously paid, if greater, For Reissues, see above | | | | |
| | | | | |

| SUBMITTED BY | | | Complete (if applicable) |
|-------------------|--------------------|--|--------------------------|
| Name (Print/Type) | Leander F. Audisio | Registration No. (Attorney/Agent) 31,732 | Telephone 703-415-1500 |
| Signature | Kearder J. Unlisio | | Date |

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